

Australian Community Pharmacists Awareness And Practice

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*Australian Community Pharmacists
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DONAVAN DIAZ

Oxford Textbook of Primary Medical Care Academic Press
 Nervous System Diseases—Advances in Research and Treatment: 2012 Edition is a ScholarlyEditions™ eBook that delivers timely, authoritative, and comprehensive information about Nervous System Diseases. The editors have built Nervous System Diseases—Advances in Research and Treatment: 2012 Edition on the vast information databases of ScholarlyNews.™ You can expect the information about Nervous System Diseases in this eBook to be deeper than what you can access anywhere else, as well as consistently reliable, authoritative, informed, and relevant. The content of Nervous System Diseases—Advances in Research and Treatment: 2012 Edition has been produced by the world's leading scientists, engineers, analysts, research institutions, and companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited

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Biologics, Biosimilars, and Biobetters ScholarlyEditions

The goal of a high quality, cost-effective and accessible health care for patients is achieved through constructing a team-based and patient-centered health care delivery system. The expanded role of pharmacists uplifts them to patient care from dispensing and manufacturing or marketing of drugs. Along with doctors and allied health professionals, pharmacists are increasingly recognized as an integral part of the patient care team. Furthermore, colleges of pharmacy need to revise and up-date their curricula to accommodate the progressively increasing development in the pharmaceutical education and the evolving new roles of practicing pharmacists in patient care settings. This book focuses on the expanded role of the pharmacists in total patient care including prescribing, dispensing, compounding,

administering and monitoring of drugs at home, hospital, community, hospice, critical care, changeover and other care settings. The sector is emerging in both developed and under-developed countries. Overburdened by patient loads and the explosion of new drugs physicians turned to pharmacists more and more for drug information especially within institutional settings. And today's patient care pharmacists are taking more interests in medication review and reconciliation, patient education and counseling, creating drug therapy regimen and monitoring compliance. The purpose of this book is to guide the pharmacists in their daily interactions with patients and to ensure collaboration with other health professionals. The contents are mostly based on recently published articles related to patient care, with most recent ideas and activities followed by the patient care pharmacists around the globe. However, a pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver. Along with professional guidelines, the book discusses the concepts and best practices of patient interaction, patient rights, and ethical decision-making for the professional pharmacist, apprentice and student. In every chapter, the role of pharmacists in that chapter specific issues are detailed explicitly so that a professional pharmacist or a student can figure out his or her do's and don'ts in that specific situation. Moreover, further reading references are listed as future recommendations. So, the book is an archive of potential references too. Among so many books about patient care, either doctors' or nurses' roles are highlighted. The proposed book highlights the pharmacists' roles and responsibilities to the most, separated from those of doctors and nurses, with the most recent information obtained from most publications in several journals, books, bulletins, newsletter, magazines etc.

Key Issues in Pharmaceuticals Law John Wiley & Sons
Helps community pharmacists and owners adapt to an increasingly competitive and challenging retail environment by providing them with industry specific tools for change. A Roberts & S Benrimo; University of Sydney & I Palmer University of Technology, Sydney.

Pharmacy Practice Research Case Studies Elsevier Health Sciences

Australia's health system functions remarkably well, despite operating under a complex set of institutions that make coordinating patient care difficult. Australia should adopt a national approach through an enhanced federal government role in steering policy, funding and priority setting.

Pharmacist Services Springer Nature

Argentina Healthcare Sector Organization, Management and Payment Systems Handbook - Strategic Information, Programs and Regulations

The Role of the Pharmacist in Patient Care Frontiers Media SA

This book provides an overview of the global pharmaceutical pricing policies. Medicines use is increasing globally with the increase in resistant microbes, emergence of new treatments, and because of awareness among consumers. This has resulted in increased drug expenditures globally. As the pharmaceutical market is expanding, a variety of pharmaceutical pricing strategies and policies have been employed by drug companies, state organizations and pharmaceutical pricing authorities.

Exploration of an Extended Role for Pharmacists Universal-Publishers

The overall goal of this book is to give the reader a state-of-the-art synopsis of the pharmacist services domain. To accomplish this goal, the authors have addressed the social, psychosocial, political, legal, historic, clinical, and economic factors that are

associated with pharmacist services. In this book, you will gain cutting-edge insights from learning about the research of experts throughout the world. The findings have relevance for enhancing pharmacist professionalism, pharmacist practice, and the progression of pharmacist services in the future.

UCSF Pharmacy Alumni Association Newsletter Elsevier Health Sciences

Now available in an Australian Edition, this new textbook provides a comprehensive, clearly structured and well-illustrated guide to differential diagnosis of symptoms that are commonly seen by the community pharmacist. The regional nature of pharmacy practice means a locally-produced text is essential. Within this comprehensive guide the authors give an in-depth view of minor conditions commonly encountered in community pharmacies in Australia. Organised mainly by body system, each chapter begins with a system overview and a brief guide to history taking. Then each symptom or condition is examined according to background, prevalence, aetiology, differential diagnosis, clinical features, conditions to eliminate, and the evidence base for over-the-counter medication. The book also contains unique features such as algorithms to aid in diagnosis, summary tables on what questions should be asked and why, and lists of further reading and useful websites. Comprehensively covers the most common conditions seen in community pharmacies Gives the evidence base for over-the-counter (OTC) recommendations for each condition Provides symptom-specific questions to ask patients for the purposes of differential diagnosis and determining if referral is needed. Discusses prevalence and epidemiology of each condition Includes algorithms to assist practitioners with differential diagnosis Practical prescribing summary tables cover key issues to be aware of when recommending certain products Hints and tips boxes give practical advice on product use Self-assessment sections with MCQs, review questions and case studies test factual recall and applied knowledge Full-colour throughout, with colour photographs of important conditions All conditions, products and recommendations have been reviewed and rewritten as necessary to reflect local drug scheduling and clinical practice within the Australasian region. Issues and conditions of local interest have been added, including treatment of bites and stings, weight loss, and expanded information on sunburn. Sources of evidence have been updated to reflect the Australian evidence base from sources such as the National Prescribing Service, Australian Prescriber, Australian Medicines Handbook, the Therapeutic Guidelines and Pharmaceutical Society of Australia guidelines. Local prevalence and epidemiological details have been included where possible.

Community Pharmacy Frontiers Media SA

A new edition of this excellent pharmacy law text, fully updated and unique to the Australian marketplace. Australian Pharmacy Law and Practice 2nd edition is the key law and ethics resource for pharmacists and students. Fully revised and updated, this new edition provides an introduction to contemporary pharmacy practice in Australia, looking at the various laws, policies and standards that govern the profession. Australian Pharmacy Law and Practice 2nd edition features excerpts of the relevant legislation, addressing all the pharmacy laws and regulations Australia's pharmacists need to know. This updated pharmacy law text also includes a wealth of new content, such as pharmacy-specific case scenarios. Plus, all chapters are clearly mapped to the National Competency Standards Framework for Pharmacists 2010, which cover aspects of medicine regulation and pharmacy practice. An essential resource in the ever-changing area of pharmacy practice, this new edition of Australian Pharmacy Law and Practice is ideal for both pharmacy students wanting to understand the legal and regulatory

implications of pharmacy practice and practicing pharmacists seeking clarification of their position in relation to the state and national legislation and regulation under which they practice. End-of-chapter questions and activities Further reading lists in every chapter State-specific and up-to-date legislation Clear, easy-to-follow layout Additional case study resources on Elsevier's Evolve portal Case scenarios incorporated throughout chapters. Listing of National Competency Standards Framework for Pharmacists 2010 covered in each chapter.

Pharmaceutical Prices in the 21st Century Springer

The first edition of *Pharmacy Practice Research Methods* provided a contemporary overview of pharmacy practice research, discussing relevant theories, methodologies, models and techniques. It included chapters on a range of quantitative, qualitative, action research and mixed methods as well as management theories underpinning change in pharmacy practice. This new edition of the book is much broader and more diversified. It includes the quality improvement methods in pharmacy practice research, focusing on the key differences between high and low-income countries with regard to pharmacy practice research, as well as the main challenges faced when conducting such research – areas of significant global interest. In addition, a number of the chapters covering fast-moving fields where new methods have been developed and published have been updated. Featuring seven new topics and presenting future trends, the book also explains in detail methods used in covert and overt observations in pharmacy practice, as well as methods involved in realist research, which are important to countries seeking to produce evidence-based information in this area.

Contemporary Research Methods in Pharmacy and Health Services McGraw-Hill Companies

Pharmacy Practice Research Case Studies provides examples and details regarding how pharmacy practice research has transformed over the past decade and how this is impacting overall health. This book presents several methodologies and techniques used in current pharmacy practice. According to the United Nations Sustainable Development Goals, countries around the world are aiming to achieve Universal Health Coverage. In this context, pharmacists are a vital part of the healthcare teams and the book portrays the research methods used in conducting pharmacy practice and medicines use research. The professional role of pharmacists has evolved tremendously over the past few decades across the globe and the pace of change has been interestingly phenomenal in varying aspects. The book provides a great resource for pharmacists, pharmaceutical scientists, policymakers, and researchers to understand the dimensions of practice, education, research, and policy concerning pharmacy, and it provides the synthesis of the development so far, pointing to the needs and demands of the future. Provides updates on current practices and research methodologies used in pharmacy and their evolution over the last decade Offers insight into research that can be applied to global pharmacy practice Uses case studies to demonstrate how sustainable pharmacy practice can be in other settings and other countries

Communication in Pharmacy Practice ScholarlyEditions

A comprehensive primer and reference, this book provides pharmacists and health practitioners the relevant science and policy concepts behind biologics, biosimilars, and biobetters from a practical and clinical perspective. Explains what pharmacists need to discuss the equivalence, efficacy, safety, and risks of biosimilars with physicians, health practitioners, and patients about Guides regulators on pragmatic approaches to dealing with these drugs in the context of rapidly evolving scientific and clinical evidence Balances scientific information on complex drugs with practical information, such as a checklist for

pharmacists

Medication Safety and Interventions to Reduce Patient Harm in Low- and Middle-Income Countries OECD Publishing

BackgroundThe development of weight management interventions specifically targeting women has recently been emphasised. Pharmacists have been highlighted as key healthcare professionals in the treatment of overweight and obesity. Currently, there is little information about weight management services provided to women pharmacy consumers by pharmacists and pharmacy assistants. **Aims**The overall aim of this research, conducted in four phases, was to investigate the state of weight management services currently provided to women through community pharmacies by identifying the attitudes, recommendations, practices and knowledge of women, pharmacists and pharmacy assistants. **Methods** The research project was divided into four phases:Phase 1 utilised researcher-administered questionnaires to elicit women pharmacy consumers' experiences with weight loss products and programs in community pharmacies in Victoria, Australia and Nottingham, England;Phase 2 explored community pharmacy weight management services throughout Australia; Phase 3 investigated pharmacists' and pharmacy assistants' weight management recommendations to women pharmacy consumers using case vignettes and simulated patient methodology (mystery shoppers); andPhase 4 involved conducting four focus groups with women, pharmacists and pharmacy assistants using the nominal group technique to determine the requirements, content and design of future educational resources for community pharmacy use. **Key findings** Results from Phase 1 highlighted that the majority of women in Victoria who had attempted to lose weight in the past (81.9%; 230/281) feel comfortable receiving advice from pharmacists, with 42% (117/281) wanting a pharmacist in their ideal weight management program and 42% (118/281) wanting their program to be delivered in a pharmacy. Overall, women in Victoria and Nottingham had similar views of what they wanted in their ideal weight management program. This study highlighted the potential for weight management educational resources developed for women pharmacy consumers in Australia or England to be used interchangeably. In Phase 2, a total of 537 pharmacist and 403 pharmacy assistant responses, from 880 different pharmacies, were received. Weight loss products were stocked by 94.5% (n=832/880) of associated pharmacies and 48.2% (n=424/880) offered a weight management program. This study highlighted current deficiencies in weight management advice offered by pharmacists and pharmacy assistants. Results from Phase 3 highlighted that, overall, pharmacists had a better understanding of the consumer's needs in each case vignette compared to pharmacy assistants. Just fewer than 60% (64/108) of pharmacists were able to correctly identify gestational weight gain for healthy weight women and how this changed when women were overweight or obese. Pharmacy assistants were significantly more likely (P

Issues in Pharmacology, Pharmacy, Drug Research, and Drug Innovation: 2011 Edition Lulu.com

In Phase 4, pharmacists and pharmacy staff members believed that the health literacy education-focused intervention was relevant to practice. Some difficulties were met in regard to the implementation of the intervention, in particular, arranging training sessions with staff. Concurring with the findings of Phase 3, participants believed use of the phrase 'What questions do you have?' was easy to implement, yet faced difficulty in the use of the teach-back method due to a lack of confidence and self-efficacy. Based on the results of this phase, future refinements to the intervention are recommended, such as including more video

examples and activities demonstrating the teach-back method to build pharmacists' and pharmacy staff members' confidence in adopting this universal precaution. Conclusion: This research project has identified that health literacy education is both prevalent in pharmacy schools in English-speaking countries, taught using a variety of methods, and that the gap in health literacy education for community pharmacists and pharmacy staff members in Australia can be partly addressed using a multi-modal health literacy education-focused intervention. The project has provided evidence to support the notion that communication behaviours, particularly the adoption of universal precautions by pharmacists and pharmacy staff members, can be modified using continuing education. Providing Australian pharmacists and pharmacy staff members with the knowledge, self-efficacy, confidence and support to address the health literacy issues faced by consumers can help improve the health outcomes of pharmacy consumers.

Community Pharmacy Australia and New Zealand Edition IOS Press

Australian community pharmacies frequently supply dose administration aids (DAAs) to residential aged care facilities (RACFs) to assist with medicine administration. These medicine organisers are packed manually or via automation, either onsite at the pharmacy or offsite by a DAA packing company. In all cases, medicines are removed from their original containers and packed into the DAA according to the medicine record of the RACF resident. Limited available literature indicates that the process of packing medicines into DAAs can be inaccurate or unsuitable, leading to DAA incidents. Targeted evidence-based interventions have not been developed, introduced and assessed to address these incidents. To improve the overall quality of medicine supply from community pharmacies to RACFs and specifically address these DAA incidents, a large-scale Australian study was needed to identify how widespread this problem is and propose strategies to address it. The overall aim of the study presented in this thesis was to evaluate how accurately and suitably medicines were packed into DAAs supplied by Victorian community pharmacies for RACF medicine administration. This study also aimed to develop, introduce and evaluate an evidence-based intervention, designed to reduce the occurrence of DAA incidents and improve the overall DAA medicine supply service. The study was conducted over four phases. Phase 1 of this study identified the types of DAA incidents and how frequently they occurred in Victorian DAAs. Cross-sectional DAA audits were conducted at 49 RACFs that were supplied DAAs from 40 community pharmacies in Victoria. A DAA incident included discrepancies between DAAs and medicine records, unsuitable medicine packing according to pharmaceutical guidelines, and medicines that were damaged, inappropriately altered or incorrectly divided. Of the 3,959 DAAs audited for 1,757 residents, 684 incidents involving 457 DAAs were identified (11.5% incident rate). The top five DAA incident types were unsuitable packing according to pharmaceutical guidelines (50.1% of all incidents identified), added medicine (9.8%), incorrect medicine quantity packed (5.4%), omitted medicine (5.3%) and damaged medicine (5.1%). This study phase confirmed the occurrence of DAA incidents, at a higher rate than previous research, and highlighted the need for an intervention to improve RACF standard of care. Phase 2 of this study identified health professionals' perceptions regarding the types and frequencies of DAA incidents in their workplaces, as well as factors contributing to these incidents and strategies to reduce their occurrence. A questionnaire was sent by email or facsimile to one contact from all 49 RACFs and 14 of their affiliated community pharmacies (recruited pharmacies). Three focus

groups were also conducted with six pharmacists, five nurses, a personal care assistant and a pharmacy technician, who were employees of the workplaces involved in Phase 1. Questionnaires were returned from 25 RACFs (51.0% response rate) and 12 pharmacies (85.7%). On average, RACF respondents perceived DAA incidents to occur more frequently (daily or weekly) than pharmacy respondents, who mostly perceived DAA incidents to occur monthly. The DAA incident types noted by respondents were similar to those identified in Phase 1. Four themes contributing to DAA incidents emerged from the focus groups, with strategies to reduce their occurrence aligned to these themes: medicine handling, communication, knowledge and awareness, and attitude. Constructive feedback was generated regarding researcher-suggested intervention strategies, including educational strategies, DAA guidelines and protocols, a pharmacist conducting additional DAA checks at the RACF, a stamp or bookmark to be used with medicine records, a communication logbook and sticker, and a medicine identification sheet. Of these, focus group participants did not universally identify one strategy that would improve the DAA medicine supply service and both advantages and disadvantages were outlined for each. It was also highlighted that the development and implementation of a multifactorial intervention would be more favourable than a single strategy, as it may increase the chance that at least one component may be useful for a specific workplace. A stakeholder-derived intervention was then developed, introduced and initially evaluated in Phase 3. The researcher-suggested intervention strategies from the second phase were refined using input from the research team and feedback from pharmacy and nursing organisations and focus group participants. The final intervention included a 30 minute education session and a 12 component toolkit, titled 'Be alert and work together for medicine safety - DAA incident awareness toolkit.' The toolkit included a guideline outlining what medicines should not be packed into DAAs, a research article concerning sodium valproate instability within DAAs, posters, bookmarks and stickers for the medicine record, a compact disk-read only memory (CD-ROM) with a presentation, a handout with the CD-ROM presentation slides, a question, answer and reflection handout, template certificates, a medicine identification sheet, a DAA incident policy and procedure, and DAA guidelines for the RACF or pharmacy workplace. The intervention was piloted in one RACF and one community pharmacy. It was later introduced to staff from 45 RACFs and 29 pharmacies that were involved in Phase 1. A questionnaire identified initial perceptions of the potential usefulness and effectiveness of the intervention. Four-hundred and thirty-five questionnaires were returned (85.0% response rate). Respondents believed the toolkit had the potential to reduce the occurrence of DAA incidents 'very' (49.6% of those who responded to this question) or 'extremely' well (20.5%), and felt that the education session was 'very' (46.6%) or 'extremely' (38.0%) useful. The intervention was evaluated both qualitatively and quantitatively in Phase 4. At least three months after the intervention was introduced at participating workplaces, the DAA audits were repeated at the 45 RACFs that were introduced to the intervention, to quantitatively assess whether the DAA incident rate identified in Phase 1 had decreased. Field notes also recorded which toolkit components were implemented. A questionnaire was sent by email or facsimile to one contact at each of the 45 RACFs and the 14 recruited community pharmacies to evaluate the perceived usefulness and effectiveness of the toolkit after it was implemented. Lastly, all of the DAA incidents identified in the Phase 1 and 4 DAA audits were classified according to their risk of causing an adverse event if they were transferred to the RACF resident. Of 2,389 DAAs

audited from 39 pharmacies for 983 residents, 770 incidents involving 502 DAAs were identified (21.0% incident rate) in Phase 4. There was a significant increase in the DAA incident rate post-intervention compared to pre-intervention (p

A Health Literacy Education-focused Intervention to Improve Community Pharmacy Adoption of Universal Precautions Nomos Verlag

Emerging methods, as well as best practices in well-used methods, in pharmacy are of great benefit to researchers, graduate students, graduate programs, residents and fellows also in other health science areas. Researchers require a text to assist in the design of experiments to address seemingly age-old problems. New interventions are needed to improve medication adherence, patients' lived experiences in health care, provider-patient relationships, and even various facets of pharmacogenomics. Advances in systems re-engineering can optimize health care practitioners' roles. Contemporary Research Methods in Pharmacy and Health Services includes multi-authored chapters by renowned experts in their field. Chapters cover examples in pharmacy, health services and others transcendent of medical care, following a standardized format, including key research points; valid and invalid assumptions; pitfalls to avoid; applications; and further inquiry. This is a valuable resource for researchers both in academia and corporate R&D, primarily in pharmacy but also in health services, and other health disciplines. Social science researchers and government scientists can also benefit from the reading. Provides multi-authored chapters by renowned experts in their field Includes examples for pharmacy and health services and others that are transcendent of medical care Covers key research points, valid and invalid assumptions, pitfalls to avoid, applications, and further inquiry

Essential Management Skills for Pharmacy and Business Managers Academic Press

This is an open access book. The 4th ICB-Pharma (The 4th International Conference Current Breakthrough in Pharmacy) invites all potential authors from universities and various organisations to submit papers in the area of pharmacy. This conference is part of a conference program called International Summit on Science Technology and Humanity (ISETH) 2021 Organized by Universitas Muhammadiyah Surakarta. Theme Pharmaceutical Development in the post-Covid-19 Era *Encyclopedia of Pharmacy Practice and Clinical Pharmacy* CRC Press

"The focus of Key Issues in Pharmaceuticals Law is on the ongoing achievement of an authentic world code for medicinal products - a so-called "Pharmacopoeia"--Through scientific technical harmonization. The legal dimension of medicinal products conditions the whole sector and it acquires a global dimension through the demand to protect people's health. Hence it is necessary to go forward to total harmonization of all its aspects. A global legal statute for medicinal products is justified by the very nature of the product, by its social control and the need for it to circulate freely, although limitations can be accepted, for reasons of solidarity with less favored populations. Awareness must arise that the challenge for healthcare is not going to find an adequate answer at the world level without a qualitative change in the world organization of the UN. The globalized world we live in demands reinforced continental solidarity, if we are to confront the common problems and bring about international order. A scientific technical code on the quality of medicinal products is essential for a statute on medicines. That code is the Pharmacopoeia."--Publisher.

Pharmacy Practice Research Methods Community Pharmacy

Innovation: 2011 Edition is a ScholarlyEditions™ eBook that delivers timely, authoritative, and comprehensive information about Pharmacology, Pharmacy, Drug Research, and Drug Innovation. The editors have built Issues in Pharmacology, Pharmacy, Drug Research, and Drug Innovation: 2011 Edition on the vast information databases of ScholarlyNews.™ You can expect the information about Pharmacology, Pharmacy, Drug Research, and Drug Innovation in this eBook to be deeper than what you can access anywhere else, as well as consistently reliable, authoritative, informed, and relevant. The content of Issues in Pharmacology, Pharmacy, Drug Research, and Drug Innovation: 2011 Edition has been produced by the world's leading scientists, engineers, analysts, research institutions, and companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited by the editors at ScholarlyEditions™ and available exclusively from us. You now have a source you can cite with authority, confidence, and credibility. More information is available at <http://www.ScholarlyEditions.com/>.

Investigating the Management of Anaphylaxis in Pharmacy MDPI
 Australians may well live the last year of their life at home, challenging governments and organisations to administer safe and affordable palliative care beyond the acute sector. While multiple factors contribute to safe and cost-effective palliative services in the home, good medication management is critical in managing symptoms. -- However, people with palliative needs are vulnerable to medication-related problems, resulting in hospital admission, noncompliance, and out-of-pocket costs - impacting how those living in the community manage symptoms. As medication experts, pharmacists are uniquely placed within the multidisciplinary team to review and evaluate these risks and facilitate better strategies. However, the complex environment in which people and their caregivers receive palliative care jeopardises the pharmacist's routine involvement. -- This thesis aimed to make an original and significant contribution to knowledge about pharmacists, caregivers, and medications regarding the care of the dying in the home environment. Rather than use a standard approach, this thesis considered six previously published works to form a PhD by Prior Publication (PhD PP). A PhD PP is a unique approach that takes previously published studies and examines these collectively, within the context of hindsight. Significantly, I wrote these six publications while conducting this research primarily as a clinician-researcher, which was declared and addressed throughout the thesis. In addition, the thesis used a conceptual model describing the complexity of managing people with multiple comorbidities to facilitate this collective examination. -- Understanding the challenges pharmacists and caregivers face in managing the use of medications in people with palliative needs in the home environment is fundamental to developing and appropriately using resources. The first two publications investigated the various medications stocked in South Australian community pharmacies and a strategy for improving the reliability of medications stocked. A further two publications considered the impact of this strategy from the perspective of the community pharmacist and how this impacts their collaboration with a broader multidisciplinary team. A fifth publication identifies the evidence underpinning the community-based pharmacist's role in collaborating with the multidisciplinary team to support older people with palliative needs. The final publication studied the factors associated with caregivers indicating which factors were associated with more significant support in understanding the medications when caring for someone with palliative needs. In re-examining these publications, this thesis establishes new insights that provide a window into the critical issues in how people with

palliative needs manage medications in the home environment, with learnings for other aspects of care delivery. -- Three insights inform the findings, including challenges with funding models, clinical communication, and standardised approaches to care. In detailing these, it became evident that clinicians used some helpful strategies poorly when managing the care of people with palliative needs in the community. Furthermore, this thesis

identifies gaps in how governments and organisations fund and allocate resources. Finally, this thesis identifies significant omissions in the evidence base regarding good pharmaceutical care for the dying. -- As organisations and governments grapple with the challenge of delivering safe and affordable care for a rapidly growing number of people with palliative needs, this analysis will be critical in future planning.

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